

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HE</i>	<i>TRC</i>	
O.I.P.E. CLASSIFIER			<i>11-1-02</i>
FORMALITY REVIEW	<i>LH</i>	<i>GC 105</i>	<i>21-0</i>
RESPONSE FORMALITY REVIEW		<i>GC 105</i>	<i>10-3-0</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>5/1/02</i>
2	<i>7/1/02</i>
3	<i>11/1/02</i>
4	<i>8/1/02</i>
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Claim	Date
Final	
Original	
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51	<i>X</i>
52	<i>11/1/02</i>
53	<i>8/1/02</i>
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Claim	Date
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If more than 150 claims or 10 actions  
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